

### DHS-015 Amendment to the Iowa Plan for Behavioral Health Contract

This Amendment to Contract Number MED-09-020 is effective August 1, 2011, between the Iowa Department of Human Services (Department) and Magellan Behavioral Care of Iowa, Inc. (Contractor).

#### Section 1. Amendment to Contract (No 09-020)

The parties mutually agree to strike the first paragraph set forth in Section 5C.1.4 of the Scope of Work set forth in RFP Med-09-010, which is incorporated into the contract by reference. For purposes of clarity, the revised Section 5C.1.4 shall read as follows:

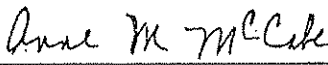

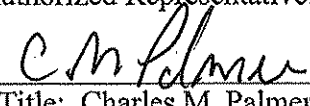
For services to IDPH Participants, the Contractor shall competitively procure a network in accordance with 401 IAC, chapter 12.

#### Section 2. Ratification, Authorization & Contingency

Except as expressly amended and supplemented herein, the Contract shall remain in full force and effect, and the parties hereby ratify and confirm the terms and conditions thereof. Each party to this Amendment represents and warrants to the other that it has the right, power, and authority to enter into and perform its obligations under this Amendment, and it has taken all requisite actions (corporate, statutory, or otherwise) to approve execution, delivery and performance of this Amendment, and this Amendment constitutes a legal, valid and binding obligation upon itself in accordance with its terms. This amendment is subject to and contingent upon CMS approval.

#### Section 3. Execution

IN WITNESS WHEREOF, in consideration of the mutual covenants set forth above and for other good and valuable consideration, the receipt, adequacy and legal sufficiency of which are hereby acknowledged, the parties have entered into the above Amendment and have caused their duly authorized representatives to execute this Amendment.

<b>Contractor, Magellan Behavioral Care of Iowa, Inc.</b>
Signature of Authorized Representative: 
Printed Name/Title: Anne M. McCabe, President, MCB of Iowa
Date: 7-22-11
<b>Iowa Department of Public Health</b>
Signature of Authorized Representative: 
Printed Name/Title: Kathy Stone, Director, Division of Behavioral Health
Date: 8-5-11
<b>Iowa Department of Human Services</b>
Signature of Authorized Representative: 
Printed Name/Title: Charles M. Palmer, Director
Date: 8-12-11